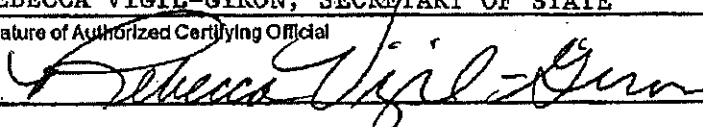


FILE COPY

FINANCIAL STATUS REPORT

(Short Form)
(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted GENERAL SERVICES ADMINISTRATION		2. Federal Grant or Other Identifying Number Assigned By Federal Agency TITLE I SECTION 101 HAVA 47-0601-0-1-808		OMB Approval No. 0348-0039	Page of pages
3. Recipient Organization (Name and complete address, including ZIP code) NEW MEXICO SECRETARY OF STATE 325 DON GASPAR - SUITE 300 SANTA FE, NEW MEXICO 87503					
4. Employer Identification Number 85-6000565		5. Recipient Account Number or Identifying Number Agency 370 Fund 903 Organization 1000		6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) April 16, 2003		To: (Month, Day, Year) open		9. Period Covered by this Report From: (Month, Day, Year) 7/01/2003 To: (Month, Day, Year) 12/31/2003	
10. Transactions		I Previously Reported		II This Period	
a. Total outlays		-0-		545,208.00	
b. Recipient share of outlays		-0-		27,260.00	
c. Federal share of outlays		-0-		517,948.00	
d. Total unliquidated obligations		-0-		2,043,418.00	
e. Recipient share of unliquidated obligations		-0-		102,171.00	
f. Federal share of unliquidated obligations		-0-		1,941,247.00	
g. Total Federal share (Sum of lines c and f)		-0-		2,459,195.00	
h. Total Federal funds authorized for this funding period		-0-		5,000,000.00	
i. Unobligated balance of Federal funds (Line h minus line g)		-0-		2,540,805.00	
11. Indirect Expense					
a. Type of Rate (Place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed					
b. Rate		c. Base		d. Total Amount	
				e. Federal Share	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.					
13. Certification: I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.					
Typed or Printed Name and Title REBECCA VIGIL-GIRON, SECRETARY OF STATE				Telephone (Area code, number and extension) (505) 827-3628	
Signature of Authorized Certifying Official 				Date Report Submitted January 21, 2004	



U.S. ELECTION ASSISTANCE COMMISSION

FAX COVER SHEET

Fax: 202/566-3127

Direct: 202/566-3100

Toll Free: 866-747-1471

DATE: 3/31/05

TO: Anna Anaya/NM Office of Secretary of State

Fax Number: 505-827-8081

FROM: Peggy Sims

NUMBER OF PAGES (INCLUDING COVER PAGE): 2

MESSAGE

Attached is a copy of New Mexico's report on HAVA Title I funds for the period ending December 31, 2003.

REBECCA VIGIL-GIRON
SECRETARY OF STATE
STATE OF NEW MEXICO
325 DON GASPAR, SUITE 300
SANTA FE, NEW MEXICO 87503
PH: (505) 827-3600 FAX: (505) 827-8081

FILE COPY

FACSIMILE TRANSMITTAL SHEET

TO: Leslie Reynolds FROM: Rebecca Vigil Giron
COMPANY: NASS DATE: 1/21/04
FAX NUMBER: 202 501-1124 TOTAL NO. OF PAGES INCLUDING COVER: 2
PHONE NUMBER: _____
RE: _____

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

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